



ENROLLMENT SERVICES DIVISION

- **Department of Early Learning/L-1**
 - Fingerprint Registration - Quick Reference Guide

Information Updated as of 2/1/2011



ENROLLMENT SERVICES DIVISION

The following presentation shows the details of scheduling appointments and making payment on-line.

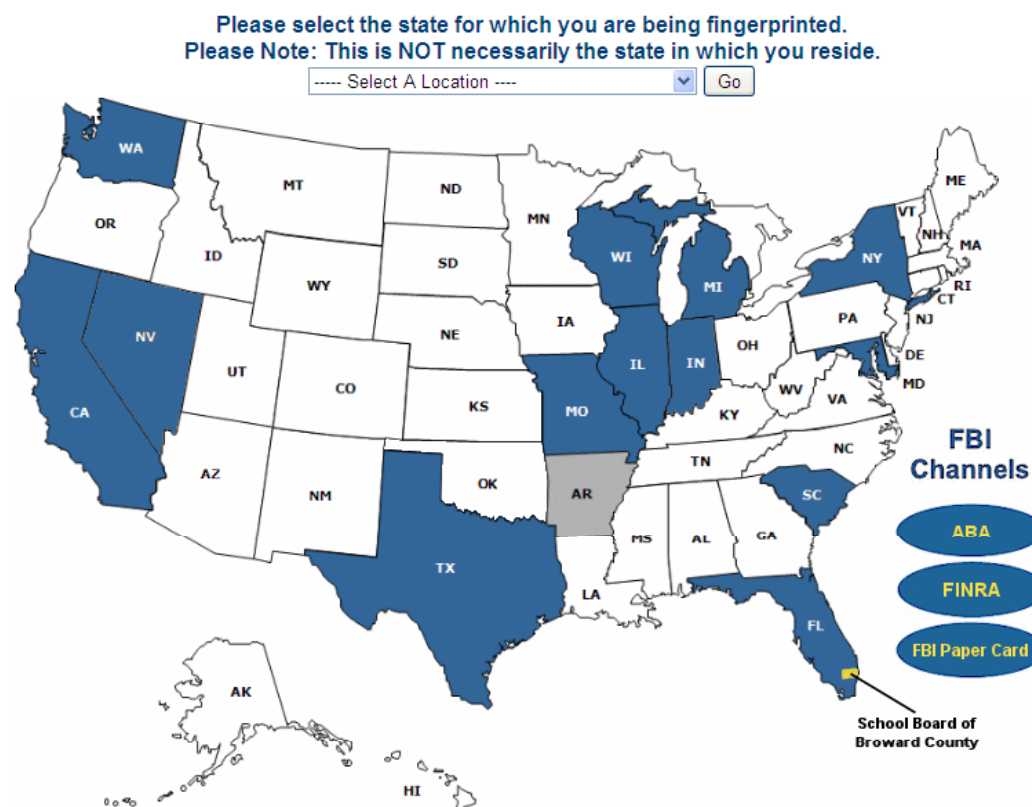
Both appointments and payment may be completed on the phone by calling the L-1 Customer Service Line.

888-771-5097 (Monday - Friday, 8 AM – 5 PM Pacific Time)

DEL Applicant Registration



- Browse to www.L1Enrollment.com and click on state of Washington or call Customer Service Center at 888-771-5097 (Monday - Friday, 8 AM – 5 PM Pacific Time) Appointments may be scheduled on the phone.



DEL Applicant Registration



- Or, browse direct to the Washington Registration page at <https://wa.ibtfingerprint.com/> and select one of the following:
 - Online Scheduling – Registration Portal
 - Locations – Roster of all fingerprint locations throughout the state
 - Forms & Links – FAQ, Escrow Packets, etc




Washington



L-1 Enrollment Services, a division of L-1 Identity Solutions (NYSE: ID), is the industry's preeminent enrollment services company, specializing in the operation of electronic fingerprint (live scan) networks and identity management services. L-1 currently services over 2 million applicants annually at over 1,000 enrollment centers in the U.S. and Canada. Our customers include federal, state and local government agencies as well as companies in a variety of industries. L-1 is also a certified FBI Channeling Agent.

L-1 is certified by the Washington State Patrol (WSP) to provide live scan fingerprinting services in Washington State. L-1 operates enrollment centers throughout the state and currently provides services to the Department of Social and Health Services.

Please choose from the following links for Washington. The "Online Scheduling" section starts the appointment process. The "Locations" section provides a listing of locations in Washington for you to browse before starting the appointment process. The "Forms and Links" section provides access to forms relating to the fingerprint background check process and links for information on this process.

- 
- [Online Scheduling](#)
 - [Locations](#)
 - [Forms and Links](#)

If you have any questions, please call L-1 Enrollment Services at

 (888) 771-5097 

[Return Home](#)

DEL Applicant Registration



- Select Registration Language

Washington Registration

The screenshot shows a registration interface with a progress bar at the top containing seven numbered circles. The first circle is highlighted and contains the text 'Welcome Bienvenidos'. Below the progress bar are two language selection boxes. The left box is titled 'English' and contains the text: 'The following pages will allow you to get registered for an appointment at a participating location. Please have your billing and personal information ready before you begin this process.' Below this text is a button labeled 'BEGIN REGISTRATION'. A red arrow points to this button. The right box is titled 'Español' and contains the text: 'Las siguientes paginas le va permitir registrarse para una cita en cualquier de los sitios participantes. Por favor, tenga a la mano su datos personales y sitiene, ssu numero de cuenta antes de empezar este proceso.' Below this text is a button labeled 'EMPEZAR REGISTRO'.

1 Welcome Bienvenidos 2 3 4 5 6 7

English

The following pages will allow you to get registered for an appointment at a participating location. Please have your billing and personal information ready before you begin this process.

BEGIN REGISTRATION

Español

Las siguientes paginas le va permitir registrarse para una cita en cualquier de los sitios participantes. Por favor, tenga a la mano su datos personales y sitiene, ssu numero de cuenta antes de empezar este proceso.

EMPEZAR REGISTRO

If you have any questions, please call L-1 Enrollment Services at (888) 771-5097

DEL Applicant Registration



- Enter Applicant Name --Individual who needs fingerprints



- The following pages will ask you for information needed to schedule and process your background check
- If you have problems, feel free to use the **live help** icon at the bottom of each page to request help online.
- *Please Note: if it is after our business hours of 8am to 5pm, or live chat service is not available, the icon will not appear.*
- You may also call us at (888) 771-5097. Your unique support ID is listed at the bottom of each page and you may be asked for this ID when you call.

[I have an existing appointment I would like to change](#)

First Name:

Last Name:

go



If you have any questions, please call L-1 Enrollment Services at (888) 771-5097

DEL Applicant Registration



- Select Department of Early Learning from the drop down menu

Washington Registration



Please choose your agency from the list below.

A screenshot of a web form with a yellow background. The label 'Agency/ Applicant Type' is on the left. To its right is a dropdown menu. A red arrow points from the left towards the dropdown. The dropdown is open, showing two options: 'Department of Early Learning (DEL)' and 'Department of Social and Health Services (DSHS)'. The first option is highlighted in blue.

If you have any questions, please call **L-1 Enrollment Services** at (888) 771-5097

DEL Applicant Registration



- Enter DEL Office Account Number and OCA; Select whether the applicant is an Employee or a Volunteer
- Note: Mark "Employee" when the applicant is a household members of the employee
- The web service will validate the information and retrieve the applicant's name and date of birth (DOB) from the OCA database

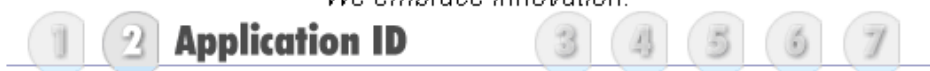
Operating Values

We make a difference.

We build trust with our customers.

We are compassionate to our customers and each other.

We embrace innovation.



[← Return to Start](#)

To continue you must provide valid information for the below items. You should have received a DEL Fingerprinting Appointment Form from the agency requesting a fingerprint check on you. Section 1 on the DEL Fingerprinting Appointment Form provides all the information required for this screen. Please enter the data exactly as it appears on your DEL Fingerprinting Appointment Form. If you did not receive a DEL Fingerprinting Appointment Form, please contact the requesting agency.

DEL Office Account Number:	<input type="text"/>	
OCA Number:	<input type="text"/>	
Reason for Fingerprint Check	<input type="text" value="v"/>	
		<input type="button" value="go"/>

DEL Applicant Registration



- Enter DEL Office Account Number and OCA; Select whether the applicant is an Employee or a Volunteer

Note: Mark "Employee" when the applicant is a household members of the employee

Example below showing info correctly entered

The screenshot shows a multi-step registration process. Step 2, 'Application ID', is highlighted. A 'Return to Start' button is visible. Below the steps, a paragraph of instructions explains that users must provide valid information from a DEL Fingerprinting Appointment Form. The form fields are: 'DEL Office Account Number' (11003853), 'OCA Number' (2554780), and 'Reason for Fingerprint Check' (a dropdown menu with 'Employee' selected). A 'go' button is at the bottom right of the form area.

1 2 **Application ID** 3 4 5 6 7

<-- Return to Start

To continue you must provide valid information for the below items. You should have received a DEL Fingerprinting Appointment Form from the agency requesting a fingerprint check on you. Section 1 on the DEL Fingerprinting Appointment Form provides all the information required for this screen. Please enter the data exactly as it appears on your DEL Fingerprinting Appointment Form. If you did not receive a DEL Fingerprinting Appointment Form, please contact the requesting agency.

DEL Office Account Number: 11003853

OCA Number: 2554780

Reason for Fingerprint Check:
Employee
Volunteer

go

If you have any questions, please call L-1 Enrollment Services at (888) 771-5097

DEL Applicant Registration

■ Site Selection

- Applicant can enter zip code to see nearest locations based on their home or work zip code or;
- Applicant can select from the drop down menu of regions, which will present a list of all sites in each general area (the map will display the general regions as reference)

1 2 3 **Location** 4 5 6 7


<-- Return to Step 2 (Application ID)

Enter a zip code to determine the closest fingerprinting location.

or

Please choose the region you will be in for your identification appointment.

Click Here for a map of Washington



CENTRAL CASCADE REGION
CENTRAL CASCADE REGION
EASTERN REGION
NORTHEAST REGION
NORTHWESTERN REGION
OLYMPIC REGION
PUGET SOUND REGION
SOUTH CENTRAL REGION
SOUTHEAST REGION
SOUTHWEST REGION



Enter zip code or select
Region in Drop Down Menu



DEL Applicant Registration



- Once a zip code or region is selected, a list of fingerprint sites in that area shows. The next 7 days of site availability is displayed.
 - Sites that are Full (no available appointments) are noted;
 - Sites that are Closed (not open for processing) are noted;
 - Sites that are Open/Available for Registration can be accessed by selecting "Click to Schedule"
 - Additional directions are available here by clicking the Directions link



[<-- Return to Step 2 \(Application ID\)](#)

sc is a supercenter location offering additional services.

Showing locations in the
Central Cascade Region of WA
in alphabetical order

January 5 - January 11 [Next Week >>](#)

[\[Select Another Region or Zip Code\]](#)

Wednesday
1/5/2011

Thursday
1/6/2011

Friday
1/7/2011

Saturday
1/8/2011

Sunday
1/9/2011

Monday
1/10/2011

Tuesday
1/11/2011

OMAK
HAVILLAH ROAD PRINTING & GRAPHICS
23 EAST APPLE AVENUE
OMAK, WA 98841

[Click to
Schedule](#)

Closed

[Click to
Schedule](#)

Closed

Closed

[Click to
Schedule](#)

Closed

[Directions](#)

Link to Special Directions to
Fingerprint Location

Session Availability (Closed
or Available)

DEL Applicant Registration



- Enter Applicant Demographic Data
 - Applicant Name & DOB will import from the OCA validation process – changes to the applicant name should not be made here otherwise the name on the fingerprint submission will not match the name on the background authorization form!

Items marked with an * are required.

I. CONTACT INFORMATION			
First Name *	Last Name *	Middle Name	Suffix
TEST	TEST		
Alias			
Street Number *	Street Address *		Apt. Number
City *	State *	Zip Code *	Country *
	WASHINGTON		United States
Home Phone *	Cell Phone		
Email Address		<input checked="" type="checkbox"/> Yes, please email me educational materials, special offers and information about other L-1 products and services.	
II. PERSONAL INFORMATION			
Date of Birth (09/26/1972) *	Gender *	Height *	Weight *
01/01/1980		ft. in.	lbs.
Ethnicity *		Hair Color *	Eye Color *
Place of Birth *	Social Security Number	Drivers License or State ID Number	Issuing State of Drivers License or State ID
			WASHINGTON
III. EMPLOYER INFORMATION			
Employer Name		Employer Phone	Extension
Street Number	Street Address		
Employer City	Employer Zip	Employer State	

DEL Applicant Registration



- Verify Applicant Registration Information
- Registration information must be Finalized to complete the registration (*Click to Finalize Appointment*)

1 2 3 4 5 6 **Verification** 7

YOUR APPOINTMENT IS NOT YET COMPLETE

Please review all of the following information.
If any of this information is incorrect, please click the change button within each section to make any needed changes to that section.

If All Information Appears Correct ----> [Click to Finalize Appointment](#)

APPLICATION TYPE

Agency/ Applicant Type: Dept. of Early Learning
Applicant or Volunteer: Applicant

[Change Application Type](#)

LOCATION

OMAK
HAVILLAH ROAD PRINTING & GRAPHICS
23 EAST APPLE AVENUE, OMAK WA

[Change Location](#)

SCHEDULED DATE AND TIME

1/5/2011 at 08:15 AM [Change Appointment Date and Time](#)

PERSONAL INFORMATION

Name: TEST TEST
Alias:
Street Address: any
any, WA 87454
US
Home Phone: 123-456-7890
Cell Phone:
Email Address: myemail@email.com
Date of Birth (09/26/1972): 01/01/1980
Gender: male
Height: 06 ft. 00 in.
Weight: 210 lbs.
Ethnicity: Caucasian or other Spanish culture
Hair Color: Brown
Eye Color: Brown
Place of Birth: WA
Citizen Country: US
Employer Name:
Employer Address:
Employer Phone:
Drivers License or State ID Number:
Issuing State of Drivers License or State ID: WA
Payment Method: US Bank E-Pay

[Change Your Personal Information](#)

If All Information Appears Correct ----> [Click to Finalize Appointment](#)

DEL Applicant Registration



■ Confirmation Screen

- Appointment Time & Date; Appointment Location
- Clickable Link to Driving Directions
- Reminder to bring Valid photo Identification and Fingerprint Appointment Form (the reminder to bring the form is missing on screen shot below, but has been requested)
- An e-mail confirmation will be sent to the applicant. Check your 'spam' in-box for incoming messages from Noreply@L1Enrollment.com

You are now leaving the L-1 Enrollment Services scheduling website. Click on the button below to go to the US Bank ePay system to collect your check or credit card information.

★ Appointment Date/Time: January 10, 2011 at 8:00 am
RegID: LZ11000002L

Remember to bring a valid Government Issued Photo ID to your appointment. If you are unable to make your appointment, contact L-1 Enrollment Services at least one day before your appointment at (888) 771-5097 with your registration number to reschedule.

After you have successfully paid by E-Pay, you will receive a confirmation number and your appointment will be scheduled. If your check or credit card is declined or you are unable to complete the ePay process for any reason, you will not be fingerprinted. Payment is required prior to your appointment. If you need to cancel or change your appointment, please contact us at the number below.

[Continue to US Bank E-Pay -->](#)
(New browser window will open)

A graphic showing a blue map with a compass rose and the text 'Get Directions' in bold black letters.

★ [Get Directions](#)

Appointment Location
OMAK
HAVILLAH ROAD PRINTING & GRAPHICS
23 EAST APPLE AVENUE, OMAK WA

Special Note

Payment must be completed within 15 minutes of receiving the Confirmation Screen. If payment is not made within 15 minutes all information is deleted.

DEL Licensee Payment



- From the Confirmation Screen
- The licensee begins to make payment


You are now leaving the L-1 Enrollment Services scheduling website. Click on the button below to go to the US Bank ePay system to collect your check or credit card information.

★ Appointment Date/Time: January 10, 2011 at 8:00 am
RegID: LZ11000002L

Remember to bring a valid Government Issued Photo ID to your appointment. If you are unable to make your appointment, contact L-1 Enrollment Services at least one day before your appointment at (888) 771-5097 with your registration number to reschedule.

After you have successfully paid by E-Pay, you will receive a confirmation number and your appointment will be scheduled. If your check or credit card is declined or you are unable to complete the ePay process for any reason, you will not be fingerprinted. Payment is required prior to your appointment. If you need to cancel or change your appointment, please contact us at the number below.

[Continue to US Bank E-Pay -->](#)
(New browser window will open)



★ [Get Directions](#)

Appointment Location
OMAK
HAVILLAH ROAD PRINTING & GRAPHICS
23 EAST APPLE AVENUE, OMAK WA

Special Note

Payment must be completed within 15 minutes of receiving the Confirmation Screen. If payment is not made within 15 minutes all information is deleted.



DEL Licensee Payment



■ Billing Method Selection

- Echeck (will continue on to US Bank Epay after appointment confirmation)
- Credit Card (will continue on to US Bank Epay after appointment confirmation)
- Escrow Account (will present box to enter Account Number)
- Referral Code is not used in Washington

A screenshot of a web form for selecting a payment method. At the top, a grey banner reads "All fingerprint reservations must be paid for at the time of appointment registration". Below this, there are three input fields: "Payment Method*", "Billing Account Number", and "Referral Code (optional)". The "Payment Method*" dropdown menu is open, showing three options: "Escrow Account", "eCheck (pay now)", and "Visa or Mastercard (pay now)". The "Escrow Account" option is highlighted in blue. A red arrow points to the "Billing Account Number" field. Below the input fields, a yellow banner displays the text "Entered All Required Information ---->". To the right of this banner is a button labeled "Send Information".

If you have any questions, please call L-1 Enrollment Services at  (888) 771-5097 

DEL Licensee Payment



- US Bank Epay Intro Screen
 - Payment can be made without registering, simply click the “Pay without Registering” link

The screenshot shows the 'Welcome to the Electronic Payment System' interface. At the top left is the L1 Identity Solutions logo and 'ENROLLMENT SERVICES DIVISION'. Below it is the 'usbank E-Payment Service' logo. A navigation bar contains links for 'PRIVACY', 'CUSTOMER SERVICE', 'HELP', and 'EXIT'. The main content area is titled 'Welcome to the Electronic Payment System' and 'REGISTERED USER LOG IN'. It contains instructions for registered users to log in with their User ID and Password. On the right, there are input fields for 'User ID:' and 'Password:', a 'Log In' button, and links for 'Register', 'Forgot Password', and 'Pay Without Registering'. A red arrow points to the 'Pay Without Registering' link. At the bottom right, there is a link for 'Browser Requirements'.

L1 IDENTITY SOLUTIONS™
ENROLLMENT SERVICES DIVISION

PRIVACY CUSTOMER SERVICE HELP EXIT

Welcome to the Electronic Payment System

REGISTERED USER LOG IN

If you have already registered with the payment system, you may log in now. Enter your User ID and Password, then click **Log In**.

User ID:

Password:

Log In

[Register](#)

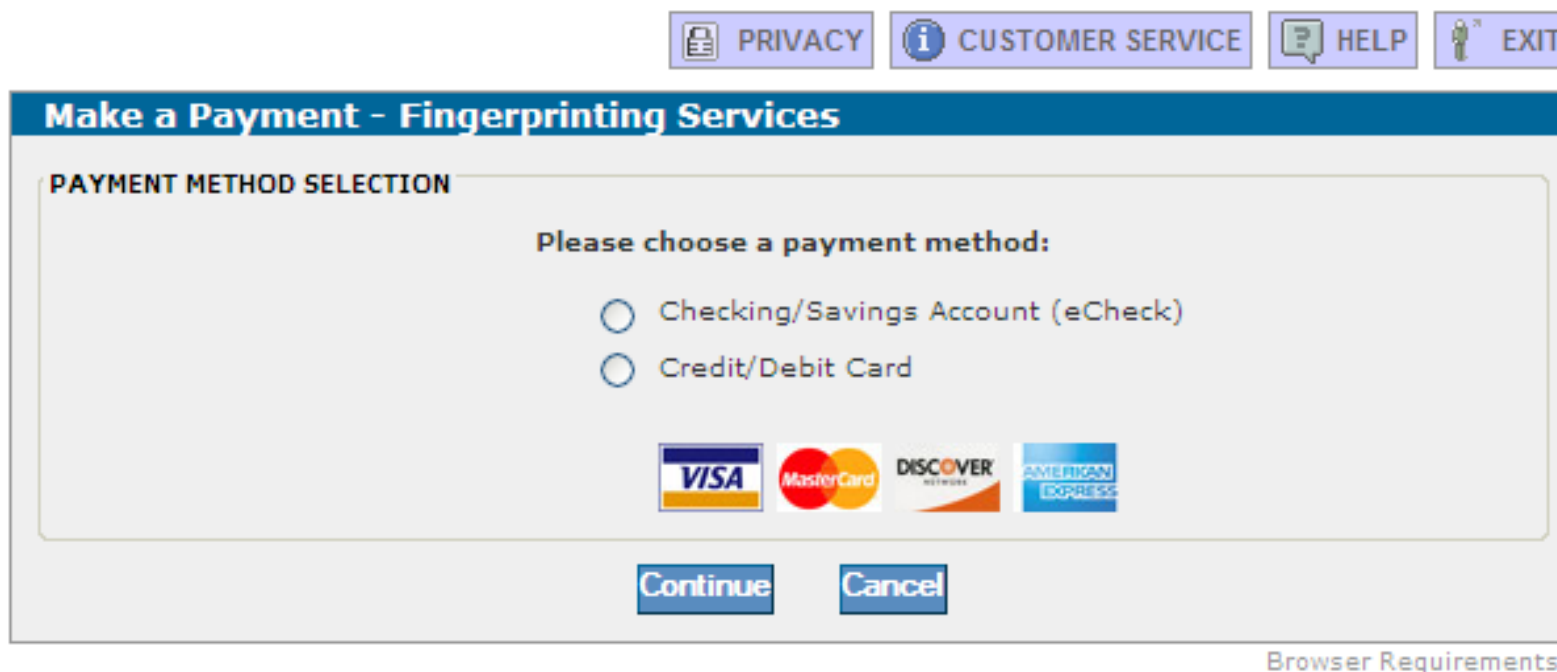
[Forgot Password](#)

[Pay Without Registering](#)

[Browser Requirements](#)

DEL Licensee Payment

- US Bank Epay Method Selection (Select either bank account or credit card)



PRIVACY CUSTOMER SERVICE HELP EXIT

Make a Payment - Fingerprinting Services

PAYMENT METHOD SELECTION

Please choose a payment method:

☐ Checking/Savings Account (eCheck)

☐ Credit/Debit Card

VISA MasterCard DISCOVER AMERICAN EXPRESS

Continue Cancel

[Browser Requirements](#)

DEL Licensee Payment

- Bank Account Payment Entry Screen

PRIVACY

CUSTOMER SERVICE

HELP

EXIT

Make a Payment - Fingerprinting Services

***Required Field**

BANK ACCOUNT INFORMATION

123456789010

1234567

101

Bank Routing Number

Bank Account Number

Check Number (not required)

Bank Routing Number:*

Bank Account Number:*

Re-Enter Bank Account Number:*

Bank Account Type:*

Is this a business account?:*

☒ Checking ☐ Savings

☐ Yes ☒ No

Continue

Cancel

DEL Licensee Payment





- Credit Card Payment Entry Screen

[PRIVACY](#) [CUSTOMER SERVICE](#) [HELP](#) [EXIT](#)

Make a Payment - Fingerprinting Services

***Required Field**

ACCOUNT INFORMATION

Credit/Debit Card Type:*
   
Credit/Debit Card Number:*
Expiration Date:* /

BILLING ADDRESS

Street Address 1:*
Street Address 2:
City:*
State:*
Zip Code:* -

[Continue](#) [Cancel](#)

DEL Licensee Payment



- If the applicant does not attend the fingerprinting process and the licensee pays for the printing by Echeck or Debit/Credit, L-1 does have a refund policy.
- The refund policy can be found at this link [L-1 Refund](#)
- If the fingerprinting was paid for through an Escrow account, the funds can be placed back into the account.
- Contact L-1 Customer Service for more information.

Customer Service

888-771-5097
Monday - Friday,
8 AM – 5 PM
Pacific Time

A screenshot of a web form titled "Make a Payment - Fingerprinting Services". At the top, there are links for "PRIVACY", "CUSTOMER SERVICE", "HELP", and "EXIT". The form is divided into two main sections: "ACCOUNT INFORMATION" and "BILLING ADDRESS". In the "ACCOUNT INFORMATION" section, there are fields for "Credit/Debit Card Type:" (a dropdown menu with "Choose one..." and icons for Visa, MasterCard, Discover, and American Express), "Credit/Debit Card Number:" (a text input field), and "Expiration Date:" (a dropdown menu with a slash separator). In the "BILLING ADDRESS" section, there are fields for "Street Address 1:", "Street Address 2:", "City:", "State:" (a dropdown menu with "Choose one..."), and "Zip Code:" (a text input field with a hyphen separator). At the bottom of the form are "Continue" and "Cancel" buttons. A red asterisk and the text "*Required Field" are positioned above the "ACCOUNT INFORMATION" section.

DEL Licensee Payment



Escrow Account Applications

- Applications can be downloaded in the “Forms” section of our website at:
http://www.l1enrollment.com/state/forms_wa/
- You must deposit funds to cover one month of fingerprinting services and maintain a positive balance in your account in order to schedule appointments
- Facilities that are state operated may select a 30-day grace period option on the Escrow Account Application.

Contact (877) 512-6962 for questions regarding L-1 Escrow Accounts